

Office of the Clerk

LOBBYIST REGISTRATION

I. Lobbyist Information

Lobbyist Name: _____
Last First MI
Mailing Address: _____
City State Zip
Business Phone: _____ Fax No.: _____
E-mail: _____

II. Principal Information

Name, address and phone number of Principal: (i.e., Person, Business entity, governmental entity, religious organization, non-profit corporation, or association whose interest you represent or by whom you are employed)

Name: _____
Mailing Address: _____
City State Zip Code
Phone Number: _____

Other Principals or Interests holding directly or indirectly a 5% or more ownership interest. (Pursuant to Section 2-11.1 (s) of the Code)

III. Legislative Issue Information

Brief description of issue and specify any city departments, offices, agencies, boards, committees or task forces in which you lobby:

THE CLERK SHALL REJECT ANY STATEMENT WHICH DOES NOT DETAIL THE ISSUE ON WHICH THE LOBBYIST HAS BEEN EMPLOYED.

IV. Fees

Any person who only appears as a representative for a non-profit organization (such as a charitable, neighborhood or civic organization) shall be required to register, but shall not be required to pay any registration fees.

** Pursuant to Section 2-11.1 (q) of the Code, have you been employed by the City in the last two years? Yes ____ No ____ If yes, state position you held below. In addition, you may be barred from lobbying your former city for a period up to two years.

** Pursuant to Section 2-11.1 (s) of the Code, a lobbyist shall state the extent of any business or professional relationship with any member(s) of the City Council/Commission. (Please state below)

** Pursuant to Section 2-11.1 (s) of the Code, any person who registers as a lobbyist shall file an expenditure report listing all expenditures, by category, by principal and in excess of \$25.00. A statement shall be filed even if there have been no expenditures during the reporting period. The expenditure report is due July 1st.

OATH

“I DO SOLE SWEAR THAT ALL OF THE FOREGOING FACTS ARE TRUE AND CORRECT AND I HAVE READ OR AM FAMILIAR WITH PROVISIONS CONTAINED IN SECTION 2-11.1 OF THE MIAMI-DADE COUNTY CONFLICT OF INTEREST AND CODE OF ETHICS ORDINANCE, INCLUDING WITHDRAWAL AND REPORTING REQUIREMENTS.”

Signature of Lobbyist: _____ **Date:** _____

Should you have any additional questions regarding the registration and reporting requirements you may call the Miami-Dade County Commission on Ethics and Public Trust at (305) 579-2594. Questions concerning fees and legislative issue information should be directed to the City Clerk.